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SERIAL NUMBER 10/809,192	FILING OR 371(c) DATE 03/25/2004 RULE	CLASS 514	GROUP ART UNIT 1624	ATTORNEY DOCKET NO. Bulk 3.0-045
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APPLICANTS

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** CONTINUING DATA *****

None

** FOREIGN APPLICATIONS *****

INDIA 252/MAS/2003 03/25/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/04/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY INDIA	SHEETS DRAWING 3	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

EXAMINER'S COMMENTS

45776

TITLE

Crystalline cetirizine monohydrochloride

FILING FEE RECEIVED 1420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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